



Inspection Report

12/5/2000 10:04 AM

Rpt ID	Assignment Nr.	CSHO ID	Supervisor ID	Inspection Nr.	Opt. Insp. Nr.

Establishment Name					
Site Address		Site Phone		Site FAX	
Mailing Address		Mail Phone		Mail FAX	
Controlling Corp		Employer ID			
Ownership		City		County	
Legal Entity		Previous Activity (State Only)			

Related Activity					
Type	Number	Satisfied	Type	Number	Satisfied

Employed in Establishment		Advance Notice?		Category	
Covered By Inspection		Union?		Primary SIC	
Controlled By Employer		Walkaround?		Secondary SIC	
		Interviewed? (State Only)		Inspected (State Only)	

OSHA-200 Log Entries	Not Available		Year		LWDI Rate	
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Inspection Type		Reason No Inspection	
Scope of Inspection			
Classification			

Anticipatory Warrant Served?		Denial Date	Date ReEntered	Date ReDenied	ReEntered
Anticipatory Subpoena Served?					

Entry			First Closing Conference		
Opening Conference			Second Closing Conference		
Walkaround			Exit		
Days On Site			Case Closed		
			No Citations Issued		

Type	ID	Optional Information

CSHO Signature		Date	
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